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RE: Connecticut Senate Hearing on SB445 An Act Concerning the Provision of Emergency Medical Services to An Individual Who Is In the Custody Or Control Of A Peace Officer.

Dear Members of the Judiciary Committee:

I am writing as a physician specializing in Psychiatry and as a member of the Medical Advisory Board of the Medical Civil Rights Committee. I recently retired from the Veterans Health Administration, but for most of my career I practiced at the Brigham and Women's Hospital where Dr. Dluhy and I were long-standing colleagues.

I support the proposed legislation (SB445) that establishes the right of an individual to receive a medical evaluation while under the custody or control of the police when emergencies arise whether they are medical or behavior in nature. Often that distinction — between the physical and mental - is hard to make even for trained medical personnel. But when either that individual or the police identify an emergent medical or mental condition, it is vitally important that trained medical personnel be allowed to evaluate the condition further. While there are different approaches to providing the best interventions and evaluations in these cases, it is important that those with appropriate medical and behavioral training be allowed to conduct them.

I can attest most clearly about the potential for misunderstanding and undue escalation in the instances of police alone dealing with mental health and behavioral emergencies. One statistic alone highlights this problem: one quarter of all individuals killed in encounters with the police have a serious mental disorder. There are many highly publicized reports of such

tragic events. Most police officers should not be and would prefer not to be in the position of having to evaluate medical or psychiatric emergencies.

Sincerely Yours,

Malcolm P. Rogers, MD, DLFAPA Assistant Professor of Psychiatry Tufts University School of Medicine